## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

5001/0459-2

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			17					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		·	BASIC FEI	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			17 minus 20=		· 00			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 = *		2			X43=		OR	X86=	
М	JLTIPLE DEPEI	NDENT CLAIM P	RESENT		<del></del>			+145=		OR	+290=	·
* 11	the difference	in column 1 is	less than z	ero, enter	"0" in c	olumn 2	ı	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
	<del></del>	(Column 1)	(Column 2)			(Column 3)	· -	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** .		=		X\$ 9=		OR	X\$18=	
	Independent	<u> </u>		***		= ,		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)										• '	10011.1221	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		= .		X43= .	,	OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL DDIT. FEE			TOTAL	•
		(Column 1)					- DOI!!! CC	•				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	(Colum HIGHE NUMBI PREVIOL PAID FO	ST ER JSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***.		-		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
**	* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										TOTAL	
***	f the "Highest Nur	nber Previously Pa ber Previously Paid	id For IN THIS	S SPACE is	less than	3, enter "3."		DIT. FEE L d in the app			DDIT. FEE L IMN 1.	